



PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09/786049

CLAIMS AS FILED - PART I (Column 1)						mn 2)		SMALL EN	ITITY	OR	OTHER THAN SMALL ENTITY	
TOTAL CLAIMS								RATE	FEE	1 1	RATE	FEE
FOR			NUMBER FILED		NUMBI	ER EXTRA		BASIC FEE		OR	BASIC FEE	860
TOTAL CHARGEABLE CLAIMS			/6 minus 20=		*			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			6 minus 3 =		· 3			X40=		OR	X80=	240
MULTIPLE DEPENDENT CLAIM PRESENT					_			+135=		OR	+270=	0.70
* If the difference in column 1 is less than zero, ente					r "0" in c	olumn 2		TOTAL		OR	TOTAL	1100
CLAIMS AS AMENDED - PART II										, 0, ,	OTHER	
(Column 1) CLAIMS					mn 2)	(Column 3)		SMALL		OR	SMALL	,
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVI	IBER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X40≃		OR	X80=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	CLAIM	<u> </u>	ļ	+135=		OR	+270=	
	•							TOTAL			TOTAL	
(Column 1) (Column 2) (Column 3)											ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	NTATION OF M	Minus	***	T CL AIM	=		X40=		OR	X80=	
_	FIRST PRESE	NTATION OF MI	OLTIPLE DEP	ENDEN	CLANVI		J	+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)			mn 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X40=		OR	X80=	
الــُ	HRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	I CLAIM	· \		+135=		OR	+270=	1
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		mber Previously Pa hber Previously Pa					er fo	und in the app	oropriate bo	k in col	umn 1.	